

UNDERSTANDING BREAST BIOPSY



Procedures to Study
Your Breast Tissue

If You Need a Breast Biopsy

You may have felt a lump in your breast. Or, your healthcare provider may have noticed a change in your breast (**abnormality**) during an exam or on an imaging test. Though you may be worried, keep in mind that most breast lumps are not due to cancer. In fact, many require little or no treatment. To help find the cause of your breast problem, you may need to have a **biopsy** (a procedure to remove a sample of tissue). This booklet can help you learn about the different types of breast biopsies and what to expect during the procedure.

What Causes Breast Lumps?

Many breast lumps are caused by harmless (**benign**) changes in your breasts. Your own female hormones often play a role. Sometimes a lump is cancerous (**malignant**). If a lump is cancerous, finding and treating it early gives you the best chance for a healthy future.

The Role of Biopsy

A biopsy is used to help find the cause of a breast problem. During the procedure, one or more samples of breast tissue are removed. These are then sent to a pathology lab for study. There is more than one type of breast biopsy. The choice of which type to be done depends on many factors. These include the appearance, size, shape, and location of the lump or abnormality. Your health history and personal preferences also matter. You and your healthcare provider will talk about your biopsy options and choose the type that is best for you. If you have questions or concerns, be sure to discuss them with your healthcare provider.



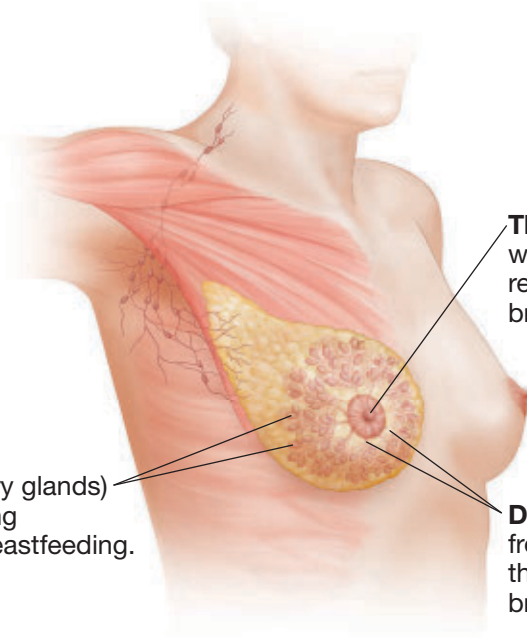
Breast Anatomy

Breasts come in all shapes and sizes, but they all share the same basic features. The nipple, areola, and skin are parts of the breast you can see. The parts you can't see include lobules, ducts, and fatty tissue. Together, these form a normal breast.

Lobules (mammary glands) produce milk during pregnancy and breastfeeding.

The nipple is where milk is released during breastfeeding.

Ducts carry milk from the lobules to the nipple during breastfeeding.



Types of Biopsies

Percutaneous biopsies use needles or special probes to remove samples of breast tissue through the skin. **Surgical biopsies** require an incision in the skin. Specific biopsy methods are listed below.



Percutaneous Biopsies

- **Fine needle aspiration** uses a very thin needle to remove fluid or a sample of cells.
- **Core needle biopsy** uses a hollow needle to remove small samples of breast tissue.
- **Vacuum-assisted biopsy** uses a special probe to collect larger tissue samples.



Surgical Biopsies

- **Incisional biopsy** removes *part* of the lump or abnormality through a skin incision.
- **Excisional biopsy** removes *all* of the lump or abnormality through a skin incision.

Percutaneous Biopsy

A percutaneous biopsy uses a needle or probe to take samples of breast tissue for testing. When needed, imaging is used to help locate the biopsy site. This is referred to as **image-guided biopsy**. Percutaneous biopsies can be done in a doctor's office or outpatient setting.

Before the Biopsy

- Tell your healthcare provider about all of the medications you take. This includes prescription and over-the-counter medications. You may need to stop taking some or all of these before the biopsy.
- On the day of the biopsy, wear a comfortable bra and a loose shirt that buttons in the front.

During the Biopsy

- To begin, the skin over the breast is cleaned. Then a local anesthetic may be used to numb the site.
- With **fine needle aspiration**, a very thin needle is used to remove the sample. If more than one sample is taken, the needle is inserted each time. Fluid is removed if the lump is a cyst containing liquid. Cells are removed if the lump is solid.
- With **core needle biopsy**, a hollow needle is used to remove the tissue sample. More than one sample is usually taken. The needle is inserted for each sample.
- With **vacuum-assisted biopsy**, the probe often is inserted only once. More than one tissue sample can be taken without removing the probe.
- A small clip may be left inside the breast to mark the biopsy site. This makes it easier to locate the site if future testing or treatment is needed.

Risks and Complications

Percutaneous biopsy has some risks. These include:

- Excessive bruising or bleeding
- Infection
- Reaction to local anesthetic
- False-negative results (you have cancer cells, but they don't appear in the sample taken)

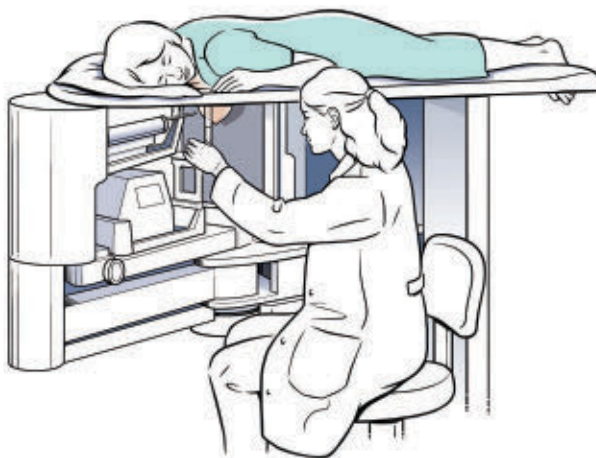


If Image-Guided Biopsy Is Needed

With any percutaneous method, imaging may be used to help pinpoint the tissue to be sampled. This may be needed if a lump or abnormality can't be felt. Once imaging helps find the biopsy site, the tissue samples are removed. Some common types of image-guided biopsy are described below.

- During **ultrasound-guided biopsy**, you lie on your back or side on an exam table. An ultrasound probe is moved over the breast to locate the biopsy site.
- During **stereotactic biopsy**, you lie on your stomach on a table that has an opening for your breast to hang through. Your breast is gently squeezed between two plates. Special x-rays are taken to locate the biopsy site.
- During **MRI-guided biopsy**, you lie on your stomach on an exam table that has an opening for your breasts to hang through. The table can slide in and out of the MRI unit. This is usually a long tube (magnet) with a tunnel in the center. Your breast is gently squeezed between two plates. MRI images and a special grid are then used to locate the biopsy site.

►► Imaging helps locate the tissue to be sampled and guide the needle or probe to the correct site in the breast.



After the Biopsy

You may go home shortly after the biopsy, no matter which method is used. You can return to your normal routine in a day or two. You may have some bruising and swelling for a few days.

When to Call the Doctor

Once home, call your healthcare provider right away if you have any of these:

- Fever of 100.4°F (38°C) or higher
- Increased pain, warmth, redness, bleeding, or drainage at the biopsy site
- Severe bruising or swelling that doesn't go away in a few days



Surgical Biopsy

Certain breast biopsies may need to be done surgically. In such cases, part or all of the lump or abnormality is removed. Most surgical biopsies are done in a hospital or clinic. To prevent pain during the procedure, anesthesia is given.

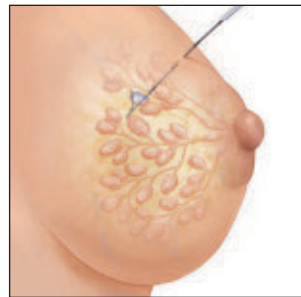
Before the Biopsy

- Tell your healthcare provider about all of the medications you take. This includes prescription and over-the-counter medications. You may need to stop taking some or all of these before the biopsy.
- Stop eating and drinking before the biopsy as instructed.
- On the day of the biopsy, wear a comfortable bra and a loose shirt that buttons in the front.
- Arrange for an adult family member or friend to drive you home afterward.



If You Need Wire Localization

If a lump or abnormality can't be felt, a special wire may be placed in the breast to mark the tissue to be removed. This is called **wire localization**. Imaging such as x-ray (mammography) or ultrasound is used to help place the wire. Then you're taken to the operating room for the surgical biopsy. The wire is removed during the biopsy.



Risks and Complications

Surgical biopsy has some risks. These can include:

- Excessive bruising or bleeding
- Infection
- Swelling due to fluid (seroma)
- Poor incision healing
- Change in breast shape
- Scarring
- Risks of anesthesia



During the Biopsy

To keep you from feeling pain during the biopsy, you are given anesthesia. Depending on the type used, you may be drowsy or in a state like deep sleep throughout the biopsy. An incision is made in your breast. If possible, this is done in a way so that the scar will be hidden. Part or all of the lump or abnormality is then removed. The incision is closed and bandaged.

After the Biopsy

You may go home soon after the biopsy. Expect to have bruising and swelling for a few days. Pain medications may be prescribed, if needed. Ice packs can help ease minor soreness, bruising, and swelling. Be sure to care for your incision as directed. Also, follow your healthcare provider's advice about bathing, raising your arms, lifting objects, and exercise.



When to Call the Doctor

Once home, call your healthcare provider right away if you have any of these:

- Fever of 100.4°F (38°C) or higher
- Increased pain, warmth, redness, bleeding, or drainage at the incision site
- Severe bruising or swelling that doesn't go away in a few days
- Cough, chest pain, or shortness of breath





Getting Your Results

Waiting for biopsy results is never easy, but your healthcare provider will likely contact you within days. He or she will discuss the results with you and let you know whether any follow-up or treatment is needed. Even if the results are normal, you should keep seeing your provider for breast cancer screenings as advised.

Screening Guidelines

In general, a positive plan for breast health includes:

- A clinical breast exam every 1 to 3 years from age 20 to 39. Then one every year from age 40 onward.
- A yearly mammogram starting at age 40, or as advised by your healthcare provider.

You and your healthcare provider can talk about whether to have screening sooner or more often based on your individual risks.

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